

Town of Frederica Review Application

Request to Review	check one application	# of complete application	Notes:
Annexation Request		15	#1 Applications that are not completely filled out nor legible will be returned.
Category B Plan Review		5	
Conceptual Category A Plan Review		10	
Conceptual Subdivision Review		10	
Final Category A Plan Review		11	
Final Subdivision		10	#2 The # of complete application includes copies of the application, plans, prints as well as any supportive material/ correspondence/info
Conditional Use		15	
Preliminary Subdivision		10	
Board of Adjustment (Exception/Variance)		15	
Rezoning Request		15	

Property Information	Please type or legibly print the information below
Kent County Tax Map/Parcel:	
Project Location:	
Property Size/Dimension:	
Project Title/Name:	
Current Zoning District:	
Proposed Zoning (if applicable):	
Current Property Use:	
Proposed Property Use:	
Designated Primary Contact Name:	

Engineer/Surveyor Information	Please type or legibly print the information below
Company Name:	
Contact Person:	
Phone Number:	
Fax Number:	
Email address:	
Mailing Address:	
City, State, Zip Code	

Current Property Owner Information	Please type or legibly print the information below
Current Owner Name:	
Contact Person:	
Phone Number:	
Email Address:	
Fax Number:	
Mailing Address:	
City, State, Zip Code	

Developer Information	Please type or legibly print the information below
Company Name:	
Contact Person:	
Phone Number:	
Fax Number:	
Email Address:	
Mailing Address:	
City, State, Zip Code	

Please read the following and certify:

- 1- I understand that the designated primary contact on this project will receive all meeting information, correspondence and will be billed for the professional services rendered from the City Engineer, City Planner and/or the City Solicitor as required for my application.
- 2-I the undersigned, hereby certify that, I have supplied all the information listed on this form and that statements contained in any papers or plans submitted as part of this application are true and correct.
- 3-I also certify that this project was designed in accordance with the plan requirements, the Comprehensive Plan, Zoning Code, and Construction Design Standards for the City.
- 4-I further certify that I or an agent on my behalf will attend all public hearings/meetings necessary for this application, and that I will answer any questions to the best of my ability to respond to the present and future needs, the health, safety, morals, convenience, order, prosperity, and general welfare of the inhabitants of Frederica.
- 5-I understand that any incomplete applications will not move forward in the review process; however, I will be notified in writing after a thorough review has been completed by the City Staff and Consultants.
- 6-It is understood that the Town of Frederica staff processes all applications in the order in which they were received. Each application will follow the process after eligibility and the appropriate reviews have been completed. The designated primary contact will receive written comments on every review.

Signature of Primary Contact	
Signature of Developer	
Signature of All Current Property Owners	
Signature of All Current Property Owners	
Submittal Date to the City	

CITY STAFF TO COMPLETE AREA BELOW	
Date Application was received:	
Application was received by:	
Application Fee Amount collected:	
Method of Payment:	